

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 11, 2005 8:00 am
Secretary of State

07-11-2005 90121 010 ***150.00

DOCUMENT # 617153

1. Entity Name
BROLAND, INC.



Principal Place of Business
**23965 WARDEN AVE, RR#2
KESWICK, ONTARIO, CANADA
L4P 3E9,**

Mailing Address
**23965 WARDEN AVE, RR#2
KESWICK, ONTARIO, CANADA
L4P 3E9,**

14018441



03082005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
98-0054919

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BAUMAN, JEROME A ESQ
7119 W BROWARD BLVD
PLANTATION, FL 33317**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate.)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
BROUWER, GERALD J
23965 WARDEN AVE RR#2
KESWICK, CANADA L4P3E9, 3E9**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 8/05

Date

Daytime Phone #

ATTACHMENT 14018441
#617153
BROLAND INC.

23965 WARDEN AVE., RR #2 KESWICK, ONTARIO L4P 3E9 TEL: 905 476-7150 FAX: 905 476-4794

JUNE 21/05

TO WHOM IT MAY CONCERN.

WE HAVE JUST FOUND OUT THROUGH OUR
ATTORNEY ADIELE STONE, OF ATKINSON, DINER
& STONE, FORT LAUDERDALE FL. PH 954-925-
5501
THAT YOU NEVER RECEIVED OUR ANNUAL
CORPORATION REPORT.

ADIELE STONE HAS BEEN IN TOUCH WITH YOUR
PEOPLE, AND WAS TOLD THAT WE SUBMIT A
COPY OF THE ORIGINAL FORM SEND, AND A
NEW CHEQUE, TO REPLACE THE EARLIER ONE.
AND THAT WOULD SOLVE OUR PROBLEMS.

HOPING THIS IS SATISFACTORY WE REMAIN
SHOULD YOU NEED ME, BEST TO CALL MY
CEL 905-836-8611

THANKS

G J BROUWER

